

WEST HEALTH'S 2018 AGS PRE-CONFERENCE

MAY 2, 2018



FROM RESEARCH TO REALITY:

ADVANCING SENIOR-APPROPRIATE
HEALTHCARE MODELS TO ENABLE
SUCCESSFUL AGING



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AGENDA AT A GLANCE

9:00 – 9:15 A.M. WELCOME: FROM RESEARCH TO REALITY

- Shelley Lyford, President and CEO, West Health
- Zia Agha, MD, MS, Chief Medical Officer and EVP, West Health

9:15 – 9:40 A.M. KEYNOTE: DRIVING EVIDENCE-BASED MODELS OF CARE TO BRING RESEARCH TO REALITY

- Kedar Mate, MD, Chief Innovation Officer, Institute for Healthcare Improvement

9:40 – 10:50 A.M. SESSION 1 - SENIOR-CENTERED CARE: CONNECTING THE DOTS TO PUT SENIORS FRONT AND CENTER

Overview: Understanding what is important to a senior with complex care needs, both medical and non-medical, is critical. This session will highlight senior-centered care models that coordinate both health and supportive services across care settings and explore barriers and gaps that may impact scaling and sustainability.

9:40 – 10:05 A.M. RESEARCH SPOTLIGHTS

Facilitated by: Zia Agha, MD, MS, Chief Medical Officer and EVP, West Health

A Human-centered model of care integrating community-based dental, social and health services at the Gary and Mary West Senior Wellness and Dental Centers

- Eli Aronoff-Spencer, MD, PhD, Consultant, West Health Institute

More than a meal: Leveraging Meals on Wheels nutrition program to identify and coordinate services for at-risk seniors

- Andrea Morris, PhD, MPH, Principal Investigator, West Health Institute

Senior-specific care in the Emergency Department: Implications and opportunities to address common geriatric syndromes

- Kelly Ko, PhD, Principal Investigator, West Health Institute

10:05 – 10:50 A.M. PANEL - SENIOR-CENTERED CARE: A DISCUSSION WITH LEADERS FROM HEALTHCARE, COMMUNITY AND SENIOR-FOCUSED ORGANIZATIONS

Moderated by: Marcus Escobedo, MPA, Senior Program Officer and Communications Director, The John A. Hartford Foundation

Panelists:

- Robyn Golden, LCSW, Associate Vice President of Population Health and Aging, Rush University Medical Center in Chicago
- Amy Berman, RN, LHD, FAAN, Senior Program Officer, The John A. Hartford Foundation
- Lisa Gibbs, MD, Professor of Family Medicine and Chief of Geriatrics and Gerontology and Medical Director, UC Irvine Senior Health Center
- Kevin Biese, MD, Vice-Chair of Academic Affairs; Clinical Associate Professor, Internal Medicine, Division of Geriatrics; Co-Director of the Division of Geriatric Emergency Medicine, University of North Carolina
- Connie Benton Wolfe, President and CEO Aging & In-Home Services of Northeast Indiana, Inc.

10:50 – 12:00 P.M. SESSION 2 - MOVING THE SITE OF CARE FOR SENIORS: EXTENDING THE CARE CONTINUUM INTO THE HOME AND COMMUNITY

Overview: Innovative models shift the site of care by co-locating clinics within community centers, providing home-based primary and palliative care, and delivering acute care in the home and community. In this session, you will learn about various care delivery models that bring care to where the senior prefers to receive care, and the challenges these innovative practices face.

10:50 – 11:15 A.M. RESEARCH SPOTLIGHTS:

Facilitated by: Zia Agha, MD, MS, Chief Medical Officer and EVP, West Health

Designing sustainable, senior-focused care in the ED: Acute care at home as an alternative to admission

- Amy Stuck, PhD, RN, Program Manager, West Health Institute

Project HoPe: Developing an innovative model of Home-based palliative care

- Jill Slaboda, PhD, Principal Investigator, West Health Institute

Telehealth for providing urgent and specialty care to seniors in long-term care settings

- Mike Kurliand, RN, Director of Telehealth, West Health Institute

11:15 – 12:00 P.M. PANEL - MOVING THE SITE OF CARE FOR SENIORS: HOW DO WE MOVE FROM DEMONSTRATIONS TO SUSTAINABLE MODELS OF CARE?

Moderated by: Zia Agha, MD, MS, Chief Medical Officer and EVP, West Health

Panelists:

- Sean Morrison, MD, Director, National Palliative Care Research Center
- Steve Handler, MD, Director of Geriatric Telemedicine Program, University of Pittsburgh; Chief Medical and Innovation Officer, Curavi Health
- James Killeen, MD, UCSD Clinical Professor, Emergency Department and Hyperbaric Medicine; Lead Informaticist, UCSD Emergency Department; Fellowship Director for Clinical Informatics at UCSD; Chief Medical Officer for San Diego Health Connect
- Bruce Leff, MD, Professor of Medicine, Johns Hopkins University School of Medicine
- Timothy Peck, MD, Co-founder and CEO, Call9

12:00 – 1:00 P.M. LUNCH

1:00 – 1:30 P.M. KEYNOTE: HEALTHCARE REFORM FOR SUCCESSFUL AGING

- Dr. Mark McClellan, MD, PhD, Director and Professor, Duke-Margolis Center for Health Policy; Former Administrator, Centers for Medicare & Medicaid Services

1:30 – 2:40 P.M. SESSION 3 - SHIFTING FROM VOLUME TO VALUE-BASED CARE: ADOPTION, CHALLENGES AND LEARNINGS FOR IMPROVED CARE DELIVERY FOR SENIORS

Overview: Multiple types of value-based payment models are being evaluated and implemented in Medicare including Accountable Care Organizations (ACOs), Medicare Advantage, bundled payments, and shared risk and shared savings models. However, challenges remain to adopt and scale these models to provide the right care at a lower cost to seniors. This panel will explore models of value-based care and highlight areas of innovation in value-based care teams and services.

1:30 – 1:55 P.M. RESEARCH SPOTLIGHTS

Facilitated by: Tim Lash, MBA, Chief Strategy Officer, West Health; President, West Health Policy Center

Independence at Home demonstration: Lessons learned from a shared savings model

- Greg Norman, PhD, Director of Clinical Research, West Health

Measuring and Rewarding Value-based Care: The role of quality registries

- Bruce Leff, MD, Professor of Medicine, Johns Hopkins University School of Medicine

Next Generation Accountable Care Organizations: Developing a learning and action network

- Liane Wardlow, PhD, Principal Investigator, West Health Institute

1:55 – 2:40 P.M. PANEL - SHIFTING FROM VOLUME TO VALUE-BASED CARE: HEALTH SYSTEMS AND PAYOR PERSPECTIVES

Facilitated by: Tim Lash, MBA, Chief Strategy Officer, West Health; President, West Health Policy Center

Panelists:

- Al Siu, MD, MSPH, Professor and Chair Emeritus, Geriatrics and Palliative Medicine, Mount Sinai School of Medicine
- Ana Tuya Fulton, MD, FACP, Chief of Geriatrics for Care New England; Medical Director for Integra Community Care Network, LLC
- Torrie Fields, MPH, Palliative Care Lead, Sr. Program Director, Blue Shield of CA
- Kristofer Smith, MD, Senior VP Population Health Management, Northwell Health

2:40 – 3:00 P.M. BREAK & NETWORKING

3:00 – 4:00 P.M. SESSION 4 - FROM RESEARCH TO REALITY: HIGHLIGHTING REAL-WORLD CARE MODELS OF EXCELLENCE FOR SENIORS

Overview: West Health has invested in developing clinical programs that serve as learning environments for implementing senior-focused models of care. These programs are inspired by our desire to learn by doing, to lead by example and ultimately enable and catalyze change in many communities.

Moderated by: Tim Lash, MBA, Chief Strategy Officer, West Health; President, West Health Policy Center

Gary and Mary West Senior Dental Center: Providing affordable, high-quality oral healthcare with comprehensive education, clinical and wellness services for seniors in need, enabling them to live healthy and productive lives

- Karen Becerra, DDS, MPH, CEO and Dental Director, Gary and Mary West Senior Dental Center
- Bill Scanlon, PhD, Consultant, West Health; Commissioner on Medicaid and CHIP Payment and Access Commission Former Managing Director, U.S. Government Accountability Office

Gary and Mary West PACE: Offering comprehensive medical and social services to frail community-dwelling seniors

- Tom Reiter, Executive Director, Gary and Mary West PACE of Northern San Diego
- Shawn Bloom, President and CEO of the National Pace Association

Gary and Mary West Senior Emergency Care Unit at UC San Diego Health: Delivering enhanced emergency services designed to meet the unique needs of seniors

- Ted Chan, MD, Professor and Chair of the Department of Emergency Medicine, UC San Diego
- Jon Zifferblatt, MD, MPH, Senior Director Clinical, West Health Institute

4:00 – 4:15 P.M. CLOSING REMARKS: TAKING POSITIVE ACTION TO SHAPE THE FUTURE OF HEALTHCARE DELIVERY FOR SENIORS

- Shelley Lyford, President and CEO, West Health

4:15 – 5:00 P.M. POSTER SESSION AND RECEPTION

PRESENTATION OVERVIEW AND OBJECTIVES:

KEYNOTES:

DRIVING EVIDENCE-BASED MODELS OF CARE TO BRING RESEARCH TO REALITY

- Kedar Mate, MD, Chief Innovation Officer, Institute for Healthcare Improvement

Overview: Many existing evidence-based models of care for older adults exist. In many cases these have been pilot tested under varying circumstances and demonstrate effects that are robust to different environments. However, too often, new care designs do not reach all those who would stand to benefit from the redesigned service. In this talk, we explore why innovations often fail to scale, the key steps to move from initial discovery to widespread reliable implementation, and what we can do to create innovations that have the potential to reach all those who could benefit.

HEALTHCARE REFORM FOR SUCCESSFUL AGING

- Dr. Mark McClellan, MD, PhD, Director and Professor, Duke-Margolis Center for Health Policy; Former Administrator, Centers for Medicare & Medicaid Services

Overview: With population aging and rising costs for medical care and long-term services and supports, finding ways to integrate health care services with other supports to enable healthy and successful aging is an urgent policy priority. However, traditional medical models and the payment systems that support them are not well aligned with many emerging opportunities to enable successful aging – such as remote monitoring and telemedicine, home-based services, integrated social and community services, and care coordinators or integrators to put it all together for individual seniors. This session will review current developments and expected trends related to “value-based” health care reforms, which aim to align payments and regulations with the goal of supporting person-centered care, in the context of successful aging. The session will highlight opportunities for health care leaders involved in developing and implementing senior-appropriate healthcare models to get increased support from these reforms, and to shape the direction of further healthcare policy reforms to support successful aging.

SESSION 1 - SENIOR-CENTERED CARE: CONNECTING THE DOTS TO PUT SENIORS FRONT AND CENTER

Overview: Understanding what is important to a senior with complex care needs, both medical and non-medical, is critical. This session will highlight senior-centered care models that coordinate both health and supportive services across care settings and explore barriers and gaps that may impact scaling and sustainability.

RESEARCH SPOTLIGHTS

A Human-centered model of care integrating community-based dental, social and health services

- Eli Aronoff-Spencer, MD, PhD, Consultant, West Health Institute

Overview: Older adults face increasingly complex health challenges, yet today’s healthcare remains mostly fragmented, episodic and system-centric. To address these issues, we developed an innovative care-model using human-centered design and community based participatory research methods. Our model focuses on whole-person care that is senior-centric and provides integrated delivery of dental, mental health, social and medical care-coordination services in the community. To this end we created a digital comprehensive geriatric assessment and holistic service integration model that uses real-time metrics to triage and guide client referrals allowing appropriate care in the right context, the right order and at the right time.

Learning Objectives:

1. Understand the principles of human-centered and whole-person care for older adults
2. Understand benefits and barriers for service integration in the community
3. Understand the needs, opportunities and value of integrated oral health care of older adults

More than a meal: Leveraging Meals on Wheels nutrition program to identify and coordinate services for at-risk seniors

- Andrea Morris, PhD, MPH, Principal Investigator, West Health Institute

Overview: There is an opportunity to leverage the capabilities of community-based organizations to address social determinants of health (e.g., nutrition, housing, transportation, social support) for high-risk seniors. Meals on Wheels nutrition programs are demonstrating their critical role in identifying health-related social needs, and connecting at-risk senior clients with the services and supports they need and want. This proactive approach has the potential to prevent a negative health event and positively impact health outcomes. As part of a multi-year collaborative research effort, Meals on Wheels America, Brown University Center for Gerontology and Healthcare Research, and the Gary and Mary West Health Institute piloted a technology enhanced meal-delivery service that enabled meal-delivery personnel to generate electronic wellness alerts when they had a concern or noticed a change in a senior client’s health, safety, or well-being. Electronic alerts were promptly received by a care navigator within the Meals on Wheels program who contacted the client by phone and offered support to address their unmet needs. This presentation will summarize project learnings and introduce tools and processes to address the social determinants of health—that if ignored—could result in preventable and costly healthcare utilization.

Learning Objectives:

1. Discuss a technology enhanced meal-delivery service that includes a standardized wellness check.
2. Review tools and processes to facilitate client monitoring and care navigation support.
3. Recognize the value of proactively identifying and addressing unmet health-related social needs for at-risk seniors.

Senior-specific care in the Emergency Department: Implications and opportunities to address common geriatric syndromes

- Kelly Ko, PhD, Principal Investigator, West Health Institute

Overview: The Emergency Department (ED) is often the point of entry for seniors into the healthcare system, and as such, plays a unique role in setting the trajectory of care for this rapidly growing and often vulnerable segment of the population. To highlight the unique needs of seniors in the ED, we analyzed national claims data on three common geriatric syndromes seniors often present with to the ED and their impact on clinical outcomes and utilization. First, we present findings on the impact of Physical Therapy for seniors presenting to the ED for ground level falls and return ED visits. Second, mortality rates among seniors discharged from the ED with delirium at multiple time points up to 12 months, and finally, 30-day ED revisit rates among seniors with dementia. Taken together, our findings point to the need for future research to not only address the underlying factors behind these common geriatric syndromes, but more importantly the need to identify, implement and disseminate effective intervention strategies.

Learning Objectives:

1. Understand the unique needs of seniors in the ED
2. Identify resources and evidence gaps in addressing common geriatric syndromes in the ED
3. Explore future opportunities to evaluate and disseminate effective intervention strategies

SESSION 2 - MOVING THE SITE OF CARE FOR SENIORS: EXTENDING THE CARE CONTINUUM INTO THE HOME AND COMMUNITY

Overview: Innovative models shift the site of care by co-locating clinics within community centers, providing home-based primary and palliative care, and delivering acute care in the home and community. In this session, you will learn about various care delivery models that bring care to where the senior prefers to receive care, and the challenges these innovative practices face.

RESEARCH SPOTLIGHTS:

Designing sustainable, senior-focused care in the ED: Acute care at home as an alternative to admission

- Amy Stuck, PhD, RN, Program Manager, West Health Institute

Overview: Healthcare payment reform incentivizes providers to reduce hospital admissions from the emergency department (ED). By developing ED-based referral options for home-based alternatives to hospital admission, health systems may be able to generate shared savings while enhancing quality and patient experience. The purpose of this study was to develop processes to support an ED-based disposition option for acute care at home (ACH) using a rapidly-responding Medicare certified home health provider. Clinical care pathways were established for patients with medical conditions that would normally require inpatient treatment. ED revisits, hospital admissions and costs were analyzed.

70 patients were identified to receive the ACH option. Patients with 17 different diagnoses were treated in ACH with cellulitis being the most common condition in 34 cases (48.6%). More than 94% of patients avoided a hospitalization for at least 30 days following their index ED visit. The average Medicare reimbursement for inpatient services for similar conditions was \$8,139. Average reimbursement for the home-based care alternative was \$3,796 indicating a potential savings of \$4,343 per patient.

Learning Objectives:

1. Identify processes needed for developing home-based alternatives to hospitalization
2. Recognize the potential for reducing Medicare costs while maintaining quality through ED dispositions to home healthcare

Mount Sinai Palliative Care at Home: An innovative model to deliver care to seriously ill seniors in their Home

- Jill Slaboda, PhD, Principal Investigator, West Health Institute

Overview: The Mount Sinai Palliative Care at Home team is developing and evaluating a home-based palliative care model that delivers optimal care to seriously ill patients in the home setting. The program addresses both the patient’s medical and psychosocial needs while maximizing doctor-patient continuity, enabling shared decision making, and delivering high-quality medical care. The cross-disciplinary care delivery team includes community health workers, social workers, nurses, nurse practitioners and doctors as to deliver quality care in the home. Using a patient identification algorithm based on claims and medical record data, the team is able to identify patients who would benefit from this level and type of care. Additionally, this model relies on telehealth to monitor symptoms and alert providers to patient health changes or needs to proactively address medical problems while the patient remains at home. The presentation will review the importance of providing palliative care in the home, provide a brief overview of how the program development and the evaluation of the care model.

Learning Objectives:

1. Understand the positive impact of palliative care delivery on patient quality of life, outcomes, improved symptoms, and reduced costs.
2. Understand the importance of providing palliative care in the home for a population of seriously ill patients.
3. Learn how community health workers and telehealth are key components of a home-based palliative care model.

Telehealth for providing urgent and specialty care to seniors in long-term care settings

- Mike Kurliand, RN, Director of Telehealth, West Health Institute

Overview: Reducing unnecessary visits to the emergency department and decreasing inappropriate admissions is of significant importance to seniors in long-term care facilities. This presentation will provide an overview of several innovative care delivery models using telehealth to enhance and augment the care the patient is receiving at their long-term care facility. The goal is to avoid unneeded emergency transports, treatment and hospital admissions for older patients. Through a telehealth process that connects patients with nurse practitioners and physicians, seniors and the facility staff are able to access emergency medicine providers as well as specialists such as geriatricians in efforts

to provide timely and appropriate care at their living space instead of the patient having to go to a healthcare facility.

Learning Objectives:

1. Identify 1-2 challenges and how to mitigate them when promoting the use of telehealth as a component of a long-term care patient's healthcare delivery model
2. Summarize 1-2 existing use cases and their impact on outcomes of nursing home patients receiving telehealth services

SESSION 3 - SHIFTING FROM VOLUME TO VALUE-BASED CARE: ADOPTION, CHALLENGES AND LEARNINGS FOR IMPROVED CARE DELIVERY FOR SENIORS

Overview: Multiple types of value-based payment models are being evaluated and implemented in Medicare including Accountable Care Organizations (ACOs), Medicare Advantage, bundled payments, and shared risk and shared savings models. However, challenges remain to adopt and scale these models to provide the right care at a lower cost to seniors. This panel will explore models of value-based care and highlight areas of innovation in value-based care teams and services.

RESEARCH SPOTLIGHTS

Independence at Home demonstration: Lessons learned from a shared savings model

- Greg Norman, PhD, Director of Clinical Research, West Health Institute

Overview: The Independence at Home (IAH) demonstration is part of the CMS Innovation Center and is designed to test the effectiveness of delivering home-based primary care (HBPC) services to Medicare beneficiaries with multiple chronic conditions. IAH is a provider-managed shared savings program that rewards practices for providing high quality care while reducing costs. A key component of the shared savings model is a method to accurately determine benchmarks that define costs expected in the absence of the clinical care program. This presentation will describe the challenges the IAH demonstration has faced determining target savings benchmarks, and how our work with Medicare claims data has informed refinements to the actuarial approach to calculating shared savings.

Learning Objectives:

1. Understand how the Independence at Home demonstration was designed to reward home-based primary care practices for delivering high quality care at a lower cost for homebound Medicare beneficiaries.

2. Describe the factors that influence benchmarks used to determine achieved savings in the IAH shared savings model for home-based primary care.

Measuring and rewarding value-based care: The role of quality registries

- Bruce Leff, MD, Director, The Center for Transformative Geriatric Research; Professor of Medicine, Johns Hopkins Medicine

Overview: The presentation will focus on issues related to the development of a qualified clinical data registries (QCDR) using the use-case of the National Home-Based Medical Care Network, which developed a quality of care framework, quality indicators, and a QCDR for the field of home-based medical care. Specific opportunities afforded by the use of QCDRs in the context of value-based care, as well as challenges to their use will be reviewed.

Learning Objectives:

1. Advantages of use of a qualified clinical data registry for value based care
2. Potential challenges in the use of QCDRs

Next generation Accountable Care Organizations: Developing a learning and action network

- Liane Wardlow, PhD, Principal Investigator, West Health Institute

Overview: Next Generation Accountable Care Organizations (NGACOs) are the newest of the Medicare Accountable Care Organization (ACO) models. One distinguishing factor of NGACOs is they are both eligible to share in Medicare savings and take full shared risk for their attributed patients. Thus, NGACOs have strong economic incentives to reduce their Medicare costs and increase the value they offer to their patients; a task that most often requires the establishment of sustainable, new models of care delivery. Yet, developing new models of care that provide safe and valuable alternatives for seniors is a process with a relatively steep learning curve.

To that end, West Health has partnered with the Institute for Healthcare Improvement (IHI) and six NGACOs to form a Learning and Action Network (LAN) focusing on the creation of new models of care for seniors when they experience acute events. The LAN provides a forum for sharing best practices, generating evidence and developing common approaches. The goal is to help NGACOs earn shared savings while also improving care for seniors. In this presentation, I will describe our approach to supporting NGACOs as they learn how to add new, innovative options for caring for seniors' acute events within the framework of a NGACO model.

Learning Objectives:

1. Identify common elements required to establish new care delivery options for seniors in NGACOs.
2. Describe early learnings from the West Health and IHI LAN.

SESSION 4 - FROM RESEARCH TO REALITY: HIGHLIGHTING REAL-WORLD CARE MODELS OF EXCELLENCE FOR SENIORS

Overview: West Health has invested in developing clinical programs that serve as learning environments for implementing senior-focused models of care. These programs are inspired by our desire to learn by doing, to lead by example and ultimately enable and catalyze change in many communities.

Gary and Mary West Senior Dental Center: Providing affordable, high-quality oral healthcare with comprehensive education, clinical and wellness services for seniors in need, enabling them to live healthy and productive lives

- Karen Becerra, DDS, MPH, CEO and Dental Director, Gary and Mary West Senior Dental Center
- Bill Scanlon, PhD, Consultant, West Health; Commissioner on Medicaid and CHIP Payment and Access Commission; Former Managing Director, U.S. Government Accountability Office

Gary and Mary West PACE: Offering comprehensive medical and social services to frail community-dwelling seniors

- Tom Reiter, Executive Director, Gary and Mary West PACE of Northern San Diego
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Gary and Mary West Senior Emergency Care Unit at UC San Diego Health: Delivering enhanced emergency services designed to meet the unique needs of seniors

- Ted Chan, MD, Professor and Chair of the Department of Emergency Medicine, UC San Diego
- Jon Zifferblatt, MD, MPH, Senior Director Clinical, West Health Institute

POSTERS:

Developing a recipe to achieve comprehensive senior malnutrition care and prevention

Andrea M. Morris, PhD; Jessa K. Engelberg, PhD; Brenda Schmitthener, MPA; Amy Herr, PMP; Kai Oliver-Kurtin (West Health Institute)

Data science platform as a service: An approach for non-programmers

Jose Unpingco, PhD; Adrian Kwong, Michael Scherer; Giancarlo Perrone; Liane Wardlow, PhD; Kelly Ko, PhD (West Health Institute)

Family caregivers' perception and experience with medical and community services

Gregory J. Norman, PhD; Sandahl H. Nelson, Jill C. Slaboda, PhD; Amy Wade, MPH and Zia Agha, MD, MS (West Health Institute)

Formative research on needs and supports for family members caring for a person with cognitive impairment

Jill Slaboda, PhD¹, Robin Fail, MPP², Brynn Bowman, MPA², Amy Wade, MPH¹, Lisa Morgan³, Gregory J. Norman, PhD¹ and Diane Meier, MD²
1. West Health Institute; 2. Center to Advance Palliative Care; 3. LDM Strategies

Home and community-based services for seniors in home-based primary care

Gregory J. Norman, PhD; Amy J. Wade, MPH; Andrea M. Morris, PhD; Jill C. Slaboda, PhD (West Health Institute)

Improving care for seniors: Understanding processes to address unmet social needs

A.M. Morris¹, J.K. Engelberg¹, S. Pashae², M. Vincent¹, G. Corzo³, S.R. Seghal², F. St-Onge², L.M. Gibbs²
1. West Health Institute, La Jolla, CA; 2. Division of Geriatrics, University of California, Irvine. Irvine, CA; 3. SeniorServ, Anaheim, CA

Seeing the whole person: Integrating community based health and dental services by comprehensive assessment and metrics-based referral

Paddy Asgari, MPH¹; Joe Gavin, MS²; Melinda Forstey, MBA²; Paul Downey, BA²; Ian Pierce, MS¹; Zia Agha, MD, MS¹; Karen Becerra, DDS, MPH³; Tracy Finlayson, PhD⁴; Eliah Aronoff-Spencer, MD, PhD⁵

1. West Health Institute 2. Serving Seniors; 3. Gary and Mary West Senior Dental Center; 4. San Diego State University 5. University of California, San Diego

Using home health to provide acute care at home for seniors as an alternative to hospital admission

Amy Stuck, PhD, RN; Chris Crowley, PhD (Gary and Mary West Health Institute); Vaishal Tolia, MD; Allyson Kreshak, MD; Tom Crisman, RN; Edward Castillo, PhD, MPH (UC San Diego Health System); Colette Armstrong, RN; Dave Davis, CNS, RN (AccentCare)

Value-based care for seniors with heart failure: Mobile interventions and reduced hospitalizations

Liane Wardlow, PhD¹, Amy Stuck, PhD, RN¹, Chris Crowley, PhD¹, James Howard, MD¹, Kathleen Sharp², David Schoenwetter, DO²; West Health Institute¹, Geisinger Health²

About West Health:

Solely funded by philanthropists Gary and Mary West, West Health includes the nonprofit and nonpartisan Gary and Mary West Health Institute and Gary and Mary West Foundation in San Diego and the Gary and Mary West Health Policy Center in Washington, DC. These organizations are working together toward a shared mission dedicated to enabling seniors to successfully age in place with access to high-quality, affordable health and support services that preserve and protect their dignity, quality of life and independence. For more information, visit westhealth.org and follow @westhealth.

About American Geriatrics Society:

The American Geriatrics Society (AGS) is a nationwide, not-for-profit society of geriatrics healthcare professionals dedicated to improving the health, independence, and quality of life of older people. Our nearly 6,000 members include geriatricians, geriatric nurses, social workers, family practitioners, physician assistants, pharmacists, and internists.

We provide leadership to healthcare professionals, policymakers, and the public by implementing and advocating for programs in patient care, research, professional and public education, and public policy.

CONTINUING EDUCATION

Accreditation:

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of the American Geriatrics Society and West Health. The American Geriatrics Society is accredited by the ACCME to provide continuing medical education for physicians.

Continuing Medical Education:

The American Geriatrics Society designates this live educational activity for a maximum of 4 AMA PRA Category 1 Credit(s)TM. Physicians should only claim credit commensurate with the extent of their participation in the activity.

website: westhealth.org | email: info@westhealth.org
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